	l States Bar Northern Dist					2009 Jan 12 AM 10: Voluntary Pertition COL NORTHERN DISTRICT OF OHI
Name of Debtor (if individual, enter Last, Fir Van Hyning, Gordon G.	st, Middle):				ebtor (Spouse I, Charlend	e) (Last, First, Middle):
All Other Names used by the Debtor in the la: (include married, maiden, and trade names):	st 8 years					Joint Debtor in the last 8 years it rade names):
Last four digits of Soc. Sec. or Individual-Tax (if more than one, state all)  xxx-xx-8894		No./Complete EI	(if mor	e than one, s	tate all)	or Individual-Taxpayer I.D. (ITIN) No./Complete EIN
Street Address of Debtor (No. and Street, City 3698 E. Normandy Park Dr. Apt. V5 Medina, OH	, and State):	ZIP Code	36 Ap		rmandy Pa	ZIP Code
County of Residence or of the Principal Place <b>Medina</b>	of Business:	44256		y of Reside dina	ence or of the	e Principal Place of Business:
Mailing Address of Debtor (if different from s	treet address):	ZIP Code	Mailii	ng Address	of Joint Deb	tor (if different from street address):  ZIP Code
Location of Principal Assets of Business Debi (if different from street address above):	or					
Type of Debtor (Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities check this box and state type of entity below.)	Health Care   Single Asse in 11 U.S.C   Railroad   Stockbroke   Commodity   Clearing Base   Other	et Real Estate as C. § 101 (51B) er y Broker	e) anization 1 States	defined "incurr	the interpretation of	r of Bankruptcy Code Under Which Petition is Filed (Check one box)  Chapter 15 Petition for Recognition of a Foreign Main Proceeding Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding  Nature of Debts (Check one box) Consumer debts, Debts are primarily business debts.  § 101(8) as business debts.
Filing Fee (Check  ■ Full Filing Fee attached  □ Filing Fee to be paid in installments (application for the court's consist unable to pay fee except in installments  □ Filing Fee waiver requested (applicable to attach signed application for the court's constallments  ■ Statistical/Administrative Information  □ Debtor estimates that funds will be available	icable to individual onsideration certifyi . Rule 1006(b). See chapter 7 individu onsideration. See Off	ing that the debto Official Form 3A. als only). Must ficial Form 3B.	Or Check	Debtor is a if: Debtor's a to insiders all applica A plan is Acceptance	a small busin not a small b aggregate not s or affiliates; ble boxes: being filed w ces of the pla	Chapter 11 Debtors  ness debtor as defined in 11 U.S.C. § 101(51D).  Dusiness debtor as defined in 11 U.S.C. § 101(51D).  Incontingent liquidated debts (excluding debts owed so) are less than \$2,190,000.  With this petition.  In were solicited prepetition from one or more accordance with 11 U.S.C. § 1126(b).  THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that fullds will be available Debtor estimates that, after any exempt pr there will be no funds available for distrib  Estimated Number of Creditors	operty is excluded	and administratic creditors.		□ 50,001-100,000	OVER 100,000	_
Estimated Assets  So to \$50,001 to \$100,001 to \$500,001 to \$500,001 to \$100,000 to \$100,00	\$1,000,001 \$10,000 to \$10 to \$50 million million	0,001 \$50,000,001 to \$100	\$100,000,001 to \$500 million			
Estimated Liabilities	\$1,000,001 \$10,000 to \$10 to \$50	0,001 \$50,000,001 to \$100	\$100,000,001 to \$500		More than \$1 billion	

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Van Hyning, Gordon G. Van Hyning, Charlene A. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Thomas F. Haskins, Jr. January 11, 2009 Signature of Attorney for Debtor(s) (Date) Thomas F. Haskins, Jr. 0005532 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and П Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(1/08) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

## Signatures

## $Signature (s) \ of \ Debtor (s) \ (Individual/Joint)$

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Gordon G. Van Hyning

Signature of Debtor Gordon G. Van Hyning

#### X /s/ Charlene A. Van Hyning

Signature of Joint Debtor Charlene A. Van Hyning

Telephone Number (If not represented by attorney)

#### January 11, 2009

Date

#### Signature of Attorney\*

#### X /s/ Thomas F. Haskins, Jr.

Signature of Attorney for Debtor(s)

#### Thomas F. Haskins, Jr. 0005532

Printed Name of Attorney for Debtor(s)

#### Thomas Haskins Co., L.P.A.

Firm Name

430 White Pond Dr.`

Suite 200

**Akron, OH 44308** 

Address

#### Email: THAS0909@aol.com

330-762-5011 Fax: 330-836-0210

Telephone Number

## January 11, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Van Hyning, Gordon G. Van Hyning, Charlene A.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

- 7	

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

# United States Bankruptcy Court Northern District of Ohio

In re	Gordon G. Van Hyning Charlene A. Van Hyning		Case No.	
	, ,	Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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#### Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Gordon G. Van Hyning
Gordon G. Van Hyning

Date: \_January 11, 2009

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Official Form 1, Exhibit D (10/06)

# United States Bankruptcy Court Northern District of Ohio

	Gordon G. Van Hyning			
In re	Charlene A. Van Hyning		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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#### Official Form 1, Exh. D (10/06) - Cont.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Charlene A. Van Hyning
Charlene A. Van Hyning

Date: \_January 11, 2009

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# **United States Bankruptcy Court Northern District of Ohio**

In re	Gordon G. Van Hyning,		Case No.	
	Charlene A. Van Hyning			
-		Debtors	Chapter	7
			-	

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	160,000.00		
B - Personal Property	Yes	4	7,924.39		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		169,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		66,074.70	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,906.84
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,187.53
Total Number of Sheets of ALL Schedu	iles	16			
	To	otal Assets	167,924.39		
			Total Liabilities	235,074.70	

# **United States Bankruptcy Court Northern District of Ohio**

In re	Gordon G. Van Hyning,		Case No.		
	Charlene A. Van Hyning				
_		Debtors	Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	2,906.84
Average Expenses (from Schedule J, Line 18)	3,187.53
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	2,906.84

#### State the following:

State the lone wing.		_
Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		9,000.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		66,074.70
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		75,074.70

Gordon G. Van Hyning, Charlene A. Van Hyning

#### Debtors

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property Nature of Debtor's Wife, Property without Ar		H The Meadows Subdivision .000A	Fee Simple	J	160,000.00	169,000.00
Current Value of	I	Description and Location of Property		Joint, or	Debtor's Interest in Property, without Deducting any Secured	Amount of Secured Claim

Parcel No. 28-19B-22-048.000A
Known for street purposes as 222 Ryeland Circle,
Medina, OH 44256

Sub-Total > **160,000.00** (Total of this page)

Total > **160,000.00** 

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

1 00	***
	10

Gordon G. Van Hyning, Charlene A. Van Hyning

Case No.	

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and		Medina County Federal Credit Union Savings and Checking Account Account No. XXX740	J	40.39
	homestead associations, or credit unions, brokerage houses, or cooperatives.		Refund - Internal Revenue Service and Treasurer - State of Ohio	J	2,799.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.		Mallard's Crossing, 4004 E. Normandy Park Dr., Medina, OH 44256	J	985.00
4.	Household goods and furnishings,		One (1) Computer with printer	J	200.00
	including audio, video, and computer equipment.		1 kitchen table and chairs, miscellaneous dishes, pots and pans, and everyday silverware,	J	150.00
			one microwave, one toaster, one coffee pot	J	150.00
			2 couches, one rocker, one TV with stand	J	200.00
			2 twin beds, 1 queen bed, 3 dressers, one love seat	J	250.00
			one DVD Player, one VCR player, one small TV	J	200.00
			Washer and Dryer	J	150.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.		Husband and Wife Clothing and wearing apparrel	J	150.00
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.		One set golf clubs and one basketball hoop with stand	J	50.00
				Sub-Tot	al > <b>5,324.39</b>

3 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

In re	Gordon G. Van Hyning,
	Charlene A. Van Hyning

Case No.
----------

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			

Sub-Total > (Total of this page)

0.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Gordon G. Van Hyning,
	Charlene A. Van Hyning

Case No.

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	One	(1) 1999 Montana Van	J	2,100.00
	other vehicles and accessories.	One	(1) 1989 Chrysler LeBaron (Not operating)	J	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
				Sub-Tota	al > <b>2,600.00</b>

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

Best Case Bankruptcy

(Total of this page)

In re	Gordon G. Van Hyning,
	Charlene A. Van Hyning

Case No.
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# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
	arming equipment and applements.	х			
34. Fa	arm supplies, chemicals, and feed.	X			
	ther personal property of any kind ot already listed. Itemize.	X			

Sub-Total > **0.00** (Total of this page)

Total >

7,924.39

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Gordon G. Van Hyning, Charlene A. Van Hyning

Debtor claims the exemptions to which debtor is entitled under:

☐ Check if debtor claims a homestead exemption that exceeds

# Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Check one box) ☐ 11 U.S.C. §522(b)(2)	\$136,875.				
11 U.S.C. §522(b)(3)					
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
Real Property					
Lot 4842 WH The Meadows Subdivision .000A Parcel No. 28-19B-22-048.000A Known for street purposes as 222 Ryeland Circle, Medina, OH 44256	Ohio Rev. Code Ann. § 2329.66(A)(1)	40,400.00	160,000.00		
Checking, Savings, or Other Financial Accounts, C	Cartificates of Donosit				
Medina County Federal Credit Union Savings and Checking Account Account No. XXX740	Ohio Rev. Code Ann. § 2329.66(A)(3)	65.00	40.39		
Refund - Internal Revenue Service and Treasurer - State of Ohio	Ohio Rev. Code Ann. § 2329.66(A)(18)	265.00	2,799.00		
Security Deposits with Utilities, Landlords, and Oth Mallard's Crossing, 4004 E. Normandy Park Dr., Medina, OH 44256	<u>ners</u> Ohio Rev. Code Ann. § 2329.66(A)(18)	985.00	985.00		
Household Goods and Furnishings One (1) Computer with printer	Ohio Rev. Code Ann. § 2329.66(A)(18)	200.00	200.00		
1 kitchen table and chairs, miscellaneous dishes, pots and pans, and everyday silverware,	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	150.00	150.00		
one microwave, one toaster, one coffee pot	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	150.00	150.00		
2 couches, one rocker, one TV with stand	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	200.00	200.00		
2 twin beds, 1 queen bed, 3 dressers, one love seat	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	250.00	250.00		
one DVD Player, one VCR player, one small TV	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	200.00	200.00		
Washer and Dryer	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	150.00	150.00		
<u>Wearing Apparel</u> Husband and Wife Clothing and wearing apparrel	Ohio Rev. Code Ann. § 2329.66(A)(18)	150.00	150.00		
<u>Firearms and Sports, Photographic and Other Hob</u> One set golf clubs and one basketball hoop with stand	<u>by Equipment</u> Ohio Rev. Code Ann. § 2329.66(A)(18)	50.00	50.00		
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> One (1) 1999 Montana Van	Ohio Rev. Code Ann. § 2329.66(A)(2)	2,100.00	2,100.00		
One (1) 1989 Chrysler LeBaron (Not operating)	Ohio Rev. Code Ann. § 2329.66(A)(18)	500.00	500.00		
(.,, <u></u>	Total:	45,815.00	167,924.39		

**0** continuation sheets attached to Schedule of Property Claimed as Exempt

Gordon G. Van Hyning, Charlene A. Van Hyning

**Debtors** 

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

	_	_		_	_			
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	Z M D Z Z G M Z	UZLLQULDA	D I SPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxx4934			2004	] ⊤ [	D A T E D	Ī		
Huntington Bank PO Box 182519 Columbus, OH 43218		J	Mortgage Lot 4842 WH The Meadows Subdivision .000A Parcel No. 28-19B-22-048.000A Known for street purposes as 222 Ryeland Circle, Medina, OH 44256		D			
			Value \$ 160,000.00				169,000.00	9,000.00
Account No.			Value \$					
Account No.			Value \$					
			Value \$					
O continuation sheets attached Subtotal (Total of this page					169,000.00	9,000.00		
	Total (Report on Summary of Schedules) 9,000.00 9,000.0					9,000.00		

Gordon G. Van Hyning, Charlene A. Van Hyning

Debtors

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. $\S$ 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to $$10,950$ * per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. $$507(a)(4)$ .
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Gordon G. Van Hyning, Charlene A. Van Hyning

**Debtors** 

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER		Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	L I Q	F	I S P U T E	AMOUNT OF CLAIM
Account No. 4631			2005-2007	Ť	T E			
Betsy Nagel MD PO Box 20388 Canton, OH 44701		J	Medical treatment and Services		D			480.00
Account No. xxxx-xxxx-xxxx-9821			thru 9/08	T	T	T	7	
BP Oil Co. Cardmember Service PO Box 94012 Palatine, IL 60094-4012		J	Credit Card Purchases - Fuel					442.30
Account No. xxxx-xxxx-xxxx-0364	$\dashv$		2006-2008	+	╁	t	+	
Chase Manhatten Bank USA NA PO Box 15153 Wilmington, DE 19886-5153		J	Credit Purchases					
				$oldsymbol{\perp}$	igspace	Ļ	$\downarrow$	11,756.00
Account No. Unknown  Childrens Hospital Physician Assoc. C/O3591 Reserve Commons Rd. Akron, OH		J	2008 Services Rendered to Holly Van Hyning					107.00
				Sub	tota	Ţ	$\dashv$	
<b>3</b> continuation sheets attached			(Total of t				)	12,785.30

In re	Gordon G. Van Hyning,
	Charlene A. Van Hyning

Case No.	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1 -	_		1 -		-		
CREDITOR'S NAME,		Ηι	usband, Wife, Joint, or Community	CON	UNL	D		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		NT I NG ENT	l QU	SPUTED	AM	IOUNT OF CLAIM
Account No. Bxx-xxx90-03			2008	Ť	T E D			
City of Medina 132 N. Elmwood Ave PO Box 703 Medina, OH 44258-0703		J	Utility Services to 222 Ryeland Circle		D			120.00
Account No. xxxx-xxxx-4372			2006-2008					
Fifth Third Bank PO Box 740789 Cincinnati, OH 45274-0789		J	Credit Card Purchases					
								16,094.00
Account No. xxxx-xxxx-xxxx-8679  First Merit Bank, NA PO Box 1499 Akron, OH 44309-1499		J	2007-2008 Credit Purchases					13,147.07
Account No. xxxxxxx8098	t		2008					
Huntington National Bank PO Box 1558 EA1W37 Columbus, OH 43216-1558		J	Overdraft Fees on Checking Account					501.97
Account No. XXXXXXXXXX3009	H	H	2006-07			H		
KeyBank 601 Oakmont Ln. Westmont, IL 60559	x	J	Loan					20,082.04
Sheet no. 1 of 3 sheets attached to Schedule of		_		Subt	ota	ıl		40.045.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)		49,945.08

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ln re	Gordon G. Van Hyning,
	Charlene A. Van Hyning

Case No.	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	CO	N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		T I N G	_ GD_	SPUTED	AMOUNT OF CLAIM
Account No. Jxxx-xxx4037			2008	] T	T E D		
Medina County Sanitary Engineers 791 W. Smith Rd. PO Box 542 Medina, OH 44258		J	Sewer Services 222 Ryeland Cir		D		218.00
Account No. xxx4342PP	t	t	2008	Н	$\overline{}$	T	
Medina General Hospital 1000 E. Washington St. Medina, OH 44256		J	Medical testing and treatment				
							1,640.83
Account No. xxx2720H, xxx9335H,  Medina General Hospital 1000 E. Washington St. Medina, OH 44256		J	2007-08 Medical Services and treatment for Joint Debtors - Additional Acct. Nos. 1511703H, 1514178H, 1502732H, 1527260H				
						L	685.07
Account No. xxxxx0299  Ohio Anesthesia Services, Inc. 970 E. Washington St. Suite 203 Medina, OH 44256		J	2008 Medical Services				116.96
Account No. xxxxxxxx2215		T	2008	П	Π	T	
Ohio Edison PO Box 3637 Akron, OH 44309-3637		J	Utility Servies to 222 Ryeland Circle				530.00
Sheet no. 2 of 3 sheets attached to Schedule of		_		Subt	ota	<u>.</u> l	2.402.22
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his į	pag	ge)	3,190.86

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In re	Gordon G. Van Hyning,	Case No.
	Charlene A. Van Hyning	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	CODEBTOR	Hu	usband, Wife, Joint, or Community	C O N T	U N L I	P	1	
MAILING ADDRESS	Ď	н	DATE CLAIM WAS INCURRED AND	Ň	ŀ	S		
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	- 11	ΙQ	<u>ا</u> يا		
AND ACCOUNT NUMBER	I	C	IS SUBJECT TO SETOFF, SO STATE.	I N	١'n	E		AMOUNT OF CLAIM
(See instructions above.)	R	۲	,	N G E N T	D	D		
Account No. xxx4178	1		2008	٦ï	Ā		r	
	1		Medical Services		E			
Radiology Professionals Inc.					T	T	1	
16101 Snow Rd.		J					1	
Ste 102		١					1	
							1	
Brook Park, OH 44142								
								153.46
Account No.	╅	T		$\top$	T	t	$^{\dagger}$	
Account No.	1						1	
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Account No.	╁	$\vdash$		+	╁	╁	+	
Account No.	-							
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Account No.	1						1	
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Account No.	1							
							1	
							1	
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	1					1		
	1	_		丄	丄	<u> </u>	+	
Sheet no. <b>3</b> of <b>3</b> sheets attached to Schedule of				Sub	tota	ıl		153.46
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)		155.40
					Γota		上	
			Ø					66,074.70
			(Report on Summary of S	chec	ule	es)	1	30,07 7.70

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Gordon G. Van Hyning, Charlene A. Van Hyning

Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Gordon G. Van Hyning, Charlene A. Van Hyning

Debtors

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Holly A. Van Hyning 3698 E. Normandy Pk. Dr. Medina, OH 44256

KeyBank 601 Oakmont Ln. Westmont, IL 60559

	Gordon G. Van Hyning
n re	Charlene A. Van Hyning

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Эe	hı	ta	rl c	٠,

Case No.

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS	OF DEBTOR AND SP	POUSE		
	RELATIONSHIP(S):	AGE(S):			
Married	Lucas - Son	16			
Employments	Zachary - Son	19	SPOUSE		
Employment:	DEBTOR		SPOUSE		
Occupation	Tradesman	N			
Name of Employer	Core Innovatech LLC	None			
How long employed	2 years				
Address of Employer	PO Box 1790 Painesville, OH 44077				
INCOME: (Estimate of avera	ge or projected monthly income at time case filed)	•	DEBTOR	(	SPOUSE
1. Monthly gross wages, salar	y, and commissions (Prorate if not paid monthly)	\$	3,709.33	\$	0.00
2. Estimate monthly overtime		\$	0.00	\$	0.00
3. SUBTOTAL		\$	3,709.33	\$	0.00
4. LESS PAYROLL DEDUC					
<ol> <li>Payroll taxes and social</li> </ol>	al security	\$	568.79	\$	0.00
b. Insurance		\$	233.70	\$	0.00
c. Union dues		\$	0.00	\$	0.00
d. Other (Specify):		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
5. SUBTOTAL OF PAYROL	L DEDUCTIONS	\$	802.49	\$	0.00
6. TOTAL NET MONTHLY	TAKE HOME PAY	\$	2,906.84	\$	0.00
7. Regular income from opera	tion of business or profession or farm (Attach detailed sta	tement) \$	0.00	\$	0.00
8. Income from real property	•	\$	0.00	\$	0.00
9. Interest and dividends		\$	0.00	\$	0.00
dependents listed above	support payments payable to the debtor for the debtor's us	e or that of \$	0.00	\$	0.00
11. Social security or governm (Specify):		\$	0.00	\$	0.00
(Specify).		\$	0.00	\$	0.00
12. Pension or retirement inco	nma	——	0.00	\$ <del></del>	0.00
13. Other monthly income	nic	ф <u> </u>	0.00	Ф <u> </u>	0.00
(Specify):			0.00	\$ \$	0.00
			0.00	Φ	0.00
14. SUBTOTAL OF LINES 7	THROUGH 13	\$	0.00	\$	0.00
15. AVERAGE MONTHLY I	NCOME (Add amounts shown on lines 6 and 14)	\$	2,906.84	\$	0.00
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals from line	e 15)	\$	2,906.84	1

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

	Gordon G. Van Hyning			
In re	Charlene A. Van Hyning		Case No.	
		Debtor(s)		

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

expenses calculated on this form may differ from the deductions from income anowed on Form 22A of 2.	2C.	
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separato	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	828.00
a. Are real estate taxes included? Yes No _X_	Ψ	
b. Is property insurance included? Yes NoX		
2. Utilities: a. Electricity and heating fuel	\$	225.00
b. Water and sewer	\$	55.00
c. Telephone	\$	121.00
d. Other Cable	\$	82.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	700.00
5. Clothing	\$	50.00
6. Laundry and dry cleaning	\$	20.00
7. Medical and dental expenses	\$	100.00
8. Transportation (not including car payments)	\$	400.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)	·	
a. Homeowner's or renter's	\$	25.00
b. Life	\$	110.53
c. Health	\$	0.00
d. Auto	\$	100.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)	·	
(Specify) Medina City Taxes	\$	50.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the		
plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Uniforms and School fees - speical schooling Zachary	\$	221.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	3,187.53
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME	_	
a. Average monthly income from Line 15 of Schedule I	\$	2,906.84
b. Average monthly expenses from Line 18 above	\$	3,187.53
c. Monthly net income (a. minus b.)	\$	-280.69

# United States Bankruptcy Court Northern District of Ohio

In re	Gordon G. Van Hyning Charlene A. Van Hyning		Case No.	
		Debtor(s)	Chapter	7

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLADATION LINDED DENALTY OF DEDITIDA BY INDIVIDITAL DEBTOD

	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR							
			ad the foregoing summary and schedules, consisting of est of my knowledge, information, and belief.					
Date	January 11, 2009	Signature	/s/ Gordon G. Van Hyning Gordon G. Van Hyning Debtor					
Date	January 11, 2009	Signature	/s/ Charlene A. Van Hyning Charlene A. Van Hyning Joint Debtor					

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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# United States Bankruptcy Court Northern District of Ohio

In re	Gordon G. Van Hyning Charlene A. Van Hyning		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$0.00 Core Innovatech LLC

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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#### 3. Payments to creditors

None

#### Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Huntington National Bank P. O. Box 182519 Columbus, OH 43218 DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING November, 2008 \$859.00 \$0.00

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or

both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

None c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

AN

COURT OR AGENCY STATUS OR AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

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#### 6. Assignments and receiverships

None 

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF ORDER

DATE OF GIFT

DESCRIPTION AND VALUE OF

**PROPERTY** 

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DESCRIPTION AND

VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Accredited Credit Counseling** 

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 12/13/08

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY For credit counseling - 100.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None 

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION **Huntington National Bank** PO Box 1558 EA1W37 Columbus, OH 43216

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE 0259876098 - Currently not in use showing negative balance

AMOUNT AND DATE OF SALE OR CLOSING (negative - 501.97)

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

**PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None 

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 222 Ryeland Circle NAME USED Medina, OH 44256 DATES OF OCCUPANCY Until October, 2008

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS NAME

**Practical Machine** Company

Unknown

Barber Rd.

Barberton, OH 44203

NATURE OF BUSINESS

**Tool and Die** 

**ENDING DATES** 

**BEGINNING AND** 

1996-2004

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101. None



NAME **ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS** 

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS **DATE ISSUED** 

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#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the de

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

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# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	January 11, 2009	Signature	/s/ Gordon G. Van Hyning	
			Gordon G. Van Hyning	
			Debtor	
Date	January 11, 2009	Signature	/s/ Charlene A. Van Hyning	
	_	-	Charlene A. Van Hyning	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Form 8 (10/05)

# United States Bankruptcy Court Northern District of Ohio

	Gordon G. Van Hyning Charlene A. Van Hyning			Case No.		
_			Debtor(s)	Chapter	7	
	CHAPTER 7 INDI	VIDUAL DEBT	OR'S STATEME	NT OF INT	TENTION	
	ave filed a schedule of assets and liabili					-11
	ave filed a schedule of executory contra- atend to do the following with respect to	•	-		•	ed lease.
	n of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
Lot 4842 WH The Meadows Subdivision .000A Parcel No. 28-19B-22-048.000A Known for street purposes as 222 Ryeland Circle, Medina, OH 44256		Huntington Bank	х		V	
Description Property	n of Leased	Lessor's Name	Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A)	t		
-NONE-						
Date <u>Ja</u>	nuary 11, 2009	Signature	/s/ Gordon G. Van Hyn Gordon G. Van Hyn Debtor			
Date <b>Ja</b>	nuary 11, 2009	Signature	Isl Charlene A. Van Charlene A. Van Hy Joint Debtor			

# United States Bankruptcy Court Northern District of Ohio

In	re	Gordon G. Var Charlene A. Va						Cas	e No.		
		01101107110711	<u></u>	, <u>.</u>		Deb	tor(s)		pter	7	
		DIS	CLO	OSURE OF	COMPE	ENSATION	OF ATTO	ORNEY FO	R DE	EBTOR(S)	)
1.	cor		me v	within one year b	before the fi	ling of the petition	on in bankrup	tcy, or agreed to	be pai	d to me, for se	med debtor and that ervices rendered or to
		For legal service	es, I h	ave agreed to acc	cept			\$		400.00	<u>)</u>
		Prior to the filin	g of t	his statement I ha	ave received	i		\$		0.00	<u>)</u>
		Balance Due						\$		400.00	<u>)</u>
2.	\$	<b>299.00</b> of the	filing	g fee has been pai	id.						
3.	The	e source of the cor	npens	sation paid to me	was:						
		Debtor		Other (specify)	:						
4.	The	e source of compe	nsatio	on to be paid to n	ne is:						
		Debtor		Other (specify)	:						
5.		· ·	share	the above-disclo	sed compen	sation with a per	son or persons	s who are not me	mbers	or associates	ciates of my law firm.  of my law firm. A
<ol> <li>7.</li> </ol>	a. b. c. d.	reaffirmati 522(f)(2)(A agreement with th	ebtor's dling of the d as ne ons w on a on a	s financial situation any petition, so debtor at the meet eded]  vith secured crugreements and avoidance of etor(s), the above	on, and rend chedules, stating of creditors to d applicat liens on h	dering advice to to attement of affairs iters and confirm oreduce to mai ions as needed ousehold good iee does not include.	he debtor in d and plan whi ation hearing, ket value; ed; preparations. de the followi	etermining whet ch may be requir and any adjourn exemption plan on and filing o	her to red; ed hea nning f mot	file a petition rings thereof; ; preparation ions pursua	in bankruptcy; n and filing of nt to 11 USC
				n of the debtor ersary proceed		lischargeability	/ actions, ju	dicial lien avo	idanc	es, relief fro	m stay actions or
						CERTIFICA	ATION				
this		ertify that the foreg kruptcy proceeding	_	is a complete sta	atement of a	ny agreement or	arrangement f	or payment to m	e for re	epresentation o	of the debtor(s) in
Dat	ted:	January 11, 20	009			/s/ T	Thomas F. H	laskins, Jr.			
						Tho	mas F. Has	kins, Jr. 00055	32		
							mas Haskin White Pond	is Co., L.P.A. I Dr.`			
						Sui	te 200				
							on, OH 4430 -762-5011 I	)8 Fax: 330-836-0	210		
							\S0909@ao		-		

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### **Chapter 7:** Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Thomas F. Haskins, Jr. 0005532	X /s/ Thomas F. Haskins, Jr.	January 11, 2009
Printed Name of Attorney	Signature of Attorney	Date
Address:		
430 White Pond Dr.`		
Suite 200		
Akron, OH 44308		
330-762-5011		
THAS0909@aol.com		
I (We), the debtor(s), affirm that I (we) have rec	Certificate of Debtor reived and read this notice.	
Gordon G. Van Hyning		
Charlene A. Van Hyning	m X~ /s/ Gordon G. Van Hyning	January 11, 2009
Printed Name of Debtor	Signature of Debtor	Date
Case No. (if known)	X /s/ Charlene A. Van Hyning	January 11, 2009
	Signature of Joint Debtor (if any)	Date

### United States Bankruptcy Court Northern District of Ohio

In re	Gordon G. Van Hyning Charlene A. Van Hyning		Case No.	
		Debtor(s)	Chapter 7	
	VERIF	FICATION OF CREDITOR	MATRIX	
he abo	ove-named Debtors hereby verify tha	t the attached list of creditors is true and	correct to the best of their knowled	ge.
	ove-named Debtors hereby verify tha  January 11, 2009	t the attached list of creditors is true and  /s/ Gordon G. Van Hyning	correct to the best of their knowled	ge.
	, ,		correct to the best of their knowled	ge.
	, ,	/s/ Gordon G. Van Hyning	correct to the best of their knowled	ge.
Date:	, ,	/s/ Gordon G. Van Hyning Gordon G. Van Hyning	correct to the best of their knowled	ge.
The abo	January 11, 2009	Isl Gordon G. Van Hyning Gordon G. Van Hyning Signature of Debtor	correct to the best of their knowled	ge.

Betsy Nagel MD PO Box 20388 Canton, OH 44701

BP Oil Co. Cardmember Service PO Box 94012 Palatine, IL 60094-4012

Chase Manhatten Bank USA NA PO Box 15153 Wilmington, DE 19886-5153

Childrens Hospital Physician Assoc. C/03591 Reserve Commons Rd. Akron, OH

City of Medina 132 N. Elmwood Ave PO Box 703 Medina, OH 44258-0703

Fifth Third Bank PO Box 740789 Cincinnati, OH 45274-0789

First Merit Bank, NA PO Box 1499 Akron, OH 44309-1499

Helvey & Associates, Inc. 1015 Center St. Warsaw, IN 46580-3420

Holly A. Van Hyning 3698 E. Normandy Pk. Dr. Medina, OH 44256

Huntington Bank PO Box 182519 Columbus, OH 43218

Huntington National Bank PO Box 1558 EA1W37 Columbus, OH 43216-1558

JP Recovery Services PO Box 16749 Rocky River, OH 44116-0749

KeyBank
601 Oakmont Ln.
Westmont, IL 60559

Medina County Sanitary Engineers 791 W. Smith Rd. PO Box 542 Medina, OH 44258

Medina General Hospital 1000 E. Washington St. Medina, OH 44256

Ohio Anesthesia Services, Inc. 970 E. Washington St. Suite 203 Medina, OH 44256

Ohio Edison PO Box 3637 Akron, OH 44309-3637

Radiology Professionals Inc. 16101 Snow Rd. Ste 102 Brook Park, OH 44142

#### B22A (Official Form 22A) (Chapter 7) (01/08)

In re	Gordon G. Van Hyning Charlene A. Van Hyning		
		Debtor(s)	
Case N	Number:		
		(If known)	

According to the calculations requi	ired by this statement
-------------------------------------	------------------------

 $\square$  The presumption arises.

**■** The presumption does not arise.

(Check the box as directed in Parts I, III, and VI of this statement.)

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. EXCLUSION FOR DISABI	LEI	D VETERANS	Al	ND NON-CONS	UM:	ER DEBTO	RS
1.4	If you are a disabled veteran described in the Veter Declaration, (2) check the box for "The presumption VIII. Do not complete any of the remaining parts of the complete and the veteral parts of the remaining parts of the remaining parts of the veteral parts of	n d	oes not arise" at the					
1A	□ <b>Veteran's Declaration.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).							
1B	If your debts are not primarily consumer debts, che the remaining parts of this statement.	ck t	he box below and o	com	plete the verification	in Pa	rt VIII. Do not	complete any of
	☐ <b>Declaration of non-consumer debts.</b> By check	ing	this box, I declare t	hat	my debts are not prin	narily	consumer debt	s.
	Part II. CALCULATION OF M	ON	NTHLY INCO	ME	FOR § 707(b)(7	7) E	XCLUSION	
2	<ul> <li>Marital/filing status. Check the box that applies a a. □ Unmarried. Complete only Column A ("Does be married, not filing jointly, with declaration of "My spouse and I are legally separated under purpose of evading the requirements of § 7076 for Lines 3-11.</li> <li>c. □ Married, not filing jointly, without the declaration of the column by t</li></ul>	ebto of so appl (b)(2	er's Income") for I eparate households licable non-bankrup (2)(A) of the Bankrup on of separate house	Line By otcy optc optc	s 3-11. The checking this box, do law or my spouse any Code." Complete of lds set out in Line 2.	ebtor d I at only c	declares under re living apart o olumn A ("Del	ther than for the otor's Income'')
	d. Married, filing jointly. Complete both Colu					Spon	ise's Income'') t	for Lines 3-11.
	All figures must reflect average monthly income re calendar months prior to filing the bankruptcy case the filing. If the amount of monthly income varied six-month total by six, and enter the result on the a	ceiv , en dur	red from all sources ding on the last day ing the six months,	s, de	rived during the six the month before	1	Column A  Debtor's Income	Column B Spouse's Income
3	Gross wages, salary, tips, bonuses, overtime, con	nmi	ssions.			\$	2,906.84	\$ 0.00
4	Income from the operation of a business, profess enter the difference in the appropriate column(s) of business, profession or farm, enter aggregate numb not enter a number less than zero. Do not include Line b as a deduction in Part V.	Lir ers	ne 4. If you operate and provide details	e mo	ore than one an attachment. Do		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•			Debtor		Spouse			
	a. Gross receipts	\$	0.00		0.00			
	b. Ordinary and necessary business expenses	\$ Su	0.00		0.00	¢	0.00	¢ 0.00
5		Su Line	btract Line b from b b from Line a and b from Line a and b from Line b from b from Line b from	Line ent	e a er the difference in o not include any	\$	0.00	\$ 0.00
5	<ul> <li>b. Ordinary and necessary business expenses</li> <li>c. Business income</li> <li>Rents and other real property income. Subtract the appropriate column(s) of Line 5. Do not enter</li> </ul>	Su Line	btract Line b from  be b from Line a and mber less than zero a deduction in Par Debtor  0.00	ent ent T V	er the difference in <b>Do not include any</b>	\$	0.00	\$ 0.00
5	b. Ordinary and necessary business expenses c. Business income  Rents and other real property income. Subtract the appropriate column(s) of Line 5. Do not enter part of the operating expenses entered on Line b  a. Gross receipts b. Ordinary and necessary operating expenses	Su Line a nu as \$	btract Line b from be b from Line a and mber less than zero a deduction in Par Debtor 0.00	ent o. I t V	e a er the difference in o not include any . Spouse 0.00 0.00	\$		
5	b. Ordinary and necessary business expenses c. Business income  Rents and other real property income. Subtract the appropriate column(s) of Line 5. Do not enter part of the operating expenses entered on Line b  a. Gross receipts	Su Line a nu as \$	btract Line b from  be b from Line a and mber less than zero a deduction in Par Debtor  0.00	ent o. I t V	e a er the difference in o not include any . Spouse 0.00 0.00	\$	0.00	
5	b. Ordinary and necessary business expenses c. Business income  Rents and other real property income. Subtract the appropriate column(s) of Line 5. Do not enter part of the operating expenses entered on Line b  a. Gross receipts b. Ordinary and necessary operating expenses	Su Line a nu as \$	btract Line b from be b from Line a and mber less than zero a deduction in Par Debtor 0.00	ent o. I t V	e a er the difference in o not include any . Spouse 0.00 0.00			\$ 0.00

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Best Case Bankruptcy

	Any amounts paid by another person or entity, on a regular basis, for the household	1		I	
	expenses of the debtor or the debtor's dependents, including child support paid for that				
8	<b>purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your				
	spouse if Column B is completed.	\$	0.00	\$	0.00
	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a				
	benefit under the Social Security Act, do not list the amount of such compensation in Column A				
9	or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00				
	· · · · · · · · · · · · · · · · · · ·	\$	0.00	\$	0.00
	<b>Income from all other sources.</b> Specify source and amount. If necessary, list additional sources on a separate page. <b>Do not include alimony or separate maintenance payments paid by your</b>				
	spouse if Column B is completed, but include all other payments of alimony or separate				
	maintenance. Do not include any benefits received under the Social Security Act or payments				
10	received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.				
	Debtor Spouse				
	a.   \$   \$				
	b.   \$   \$				
	Total and enter on Line 10	\$	0.00	\$	0.00
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$	2,906.84	\$	0.00
	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11,				
12	Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$			2,906.84
		Ψ			2,000.04
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the enter the result.	numb	er 12 and \$		34,882.08
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and he (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankru				
	a. Enter debtor's state of residence: OH b. Enter debtor's household size:		4 \$		71,489.00
	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.				
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "		esumption doe	es not	arise" at the
	top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII				
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)				
16	16 Enter the amount from Line 12.			
17	Column B that was NOT paid on a regular basis for dependents. Specify in the lines below the basis for spouse's tax liability or the spouse's support of per	ne 2.c, enter on Line 17 the total of any income listed in Line 11 or the household expenses of the debtor or the debtor's or excluding the Column B income (such as payment of the essons other than the debtor or the debtor's dependents) and the essary, list additional adjustments on a separate page. If you did	,	
1 /	a.	\$		
	b. c.	\$		
	d.	\$		
	Total and enter on Line 17		\$	
18	Current monthly income for § 707(b)(2). Subtra	act Line 17 from Line 16 and enter the result.	\$	
	Part V. CALCULAT	ION OF DEDUCTIONS FROM INCOME		
	Subpart A: Deductions und	er Standards of the Internal Revenue Service (IRS)		

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19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			\$		
19B	National Standards: health care. Enter in Line all be Pocket Health Care for persons under 65 years of age, Health Care for persons 65 years of age or older. (This clerk of the bankruptcy court.) Enter in Line bl the nu of age, and enter in Line b2 the number of members of number of household members must be the same as the obtain a total amount for household members under 65 b2 to obtain a total amount for household members 65 c2 to obtain a total health care amount, and enter the retain the properties of the	and in Ling information information in the information in Ling in the information in Ling	ne a2 the content of a sember sehold stated in the reference of a seminary and energy an	ne IRS National Stand vailable at <u>www.usdo</u> s of your household v who are 65 years of a n Line 14b.) Multiply esult in Line c1. Multi nter the result in Line d. d members 65 years vance per member ber of members	dards for Out-of-Pocket <u>oj.gov/ust/</u> or from the who are under 65 years age or older. (The total y Line a1 by Line b1 to iply Line a2 by Line e c2. Add Lines c1 and	\$
20A	Local Standards: housing and utilities; non-mortga Utilities Standards; non-mortgage expenses for the appavailable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the	ge expense	unty a	nd household size. (7		\$
20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.  [a. IRS Housing and Utilities Standards; mortgage/rental expense]  [b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42]  [c. Net mortgage/rental expense]				(this information is he total of the Average from Line a and enter hand in Line a.  It in Lines 20A and using and Utilities	\$
22A	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  D D D D D O D O D O D O D O D O D O D				\$	
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)					
22B	Local Standards: transportation; additional public for a vehicle and also use public transportation, and you public transportation expenses, enter on Line 22B Standards: Transportation. (This amount is available a court.)	ou contend the "Publi	that y	ou are entitled to an a sportation" amount f	additional deduction for rom IRS Local	\$

Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoi.gov/nst/ or from the clerk of the bankruptey court; enter in Line b the total of the Average Working of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.  25	23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  □ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42  c. Net ownership/lease expense for Vehicle 1  Subtract Line b from Line a.		
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance	24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.    Average Monthly Payment for any debts secured by Vehicle   \$ Average Monthly Payment for any debts secured by \$ Average Mo		
Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other th	25	Other Necessary Expenses: taxes. Enter the total average monthly e	xpense that you actually incur for all federal,	\$
deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs.  Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previou	23			\$
life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.  Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.  Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.  Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	26	deductions that are required for your employment, such as retirement	contributions, union dues, and uniform costs.	\$
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33 <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.	32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and		
	33	Total Expenses Allowed under IRS Standards. Enter the total of L	ines 19 through 32.	

	Subpart B: Additi	onal Living Expense Deductions	
	Note: Do not include any ex	penses that you have listed in Lines 19-32	
	Health Insurance, Disability Insurance, and Health State the categories set out in lines a-c below that are reasonate dependents.	Savings Account Expenses. List the monthly expenses in ably necessary for yourself, your spouse, or your	
34	a. Health Insurance	\$	
	b. Disability Insurance	\$	
	c. Health Savings Account	\$	\$
	Total and enter on Line 34.		
	If you do not actually expend this total amount, state below:	your actual total average monthly expenditures in the space	
	\$		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.		
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.		
38	<b>Education expenses for dependent children less than 18.</b> Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary		
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National		
40	<b>Continued charitable contributions.</b> Enter the amour financial instruments to a charitable organization as def	nt that you will continue to contribute in the form of cash or fined in 26 U.S.C. § 170(c)(1)-(2).	\$
41	Total Additional Expense Deductions under § 707(b)	). Enter the total of Lines 34 through 40	\$

		S	ubpart C: Deductions for De	bt I	Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
		Name of Creditor	Property Securing the Debt	A	Average Monthly Payment	Does payment include taxes or insurance?	
	a.			\$		□yes □no	
			f any of debts listed in Line 42 are sec sary for your support or the support o	curec			\$
43	paym sums	ents listed in Line 42, in order to in default that must be paid in or illowing chart. If necessary, list a	(the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclosud dditional entries on a separate page.	The	cure amount would	ld include any such amounts in	
		Name of Creditor	Property Securing the Debt		1/60th of th	e Cure Amount	
	a.					otal: Add Lines	\$
44	priori		ims. Enter the total amount, divided by claims, for which you were liable at a sthose set out in Line 28.				\$
	Char chart.	ter 13 administrative expenses. multiply the amount in line a by	If you are eligible to file a case under the amount in line b, and enter the re	r Cha sulti	apter 13, completeng administrative	e the following expense.	
45	a. b.	issued by the Executive Office	strict as determined under schedules of United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	\$ x			
	c.	Average monthly administrati	ve expense of Chapter 13 case	To	otal: Multiply Line	es a and b	\$
46	Total	<b>Deductions for Debt Payment.</b>	Enter the total of Lines 42 through 45	5.			\$
		S	ubpart D: Total Deductions f	ron	1 Income		
47	Total	of all deductions allowed unde	r § 707(b)(2). Enter the total of Lines	33,	41, and 46.		\$
		Part VI. DE	TERMINATION OF § 707()	o)(2	) PRESUMP	ΓΙΟΝ	
48	Ente	r the amount from Line 18 (Cur	rent monthly income for § 707(b)(2	))			\$
49	Ente	r the amount from Line 47 (Tot	al of all deductions allowed under §	707	(b)(2))		\$
50	Mon	thly disposable income under §	<b>707(b)(2).</b> Subtract Line 49 from Line	e 48	and enter the resu	ılt.	\$
51	60-m result	_	<b>707(b)(2).</b> Multiply the amount in L	ine 5	0 by the number	60 and enter the	\$
	Initia	l presumption determination. (	Check the applicable box and proceed	as di	irected.		
52	☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of pastatement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					se" at the top of pa	ge 1 of this
32			is more than \$10,950 Check the box is on in Part VIII. You may also comple				
		ne amount on Line 51 is at least	\$6,575, but not more than \$10,950.	Con	nplete the remain	der of Part VI (Line	es 53 through 55).
53	Ente	the amount of your total non-	priority unsecured debt				\$
54	Thre	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.					\$

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Best Case Bankruptcy

	Secondary presumption determination. Check the applicable box and proceed as directed.						
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.						
		☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
	Part VII. ADDITIONAL I	EXPENSE CLAIMS					
	you and your family and that you contend should be an additional de	wise stated in this form, that are required for the health and welfare of eduction from your current monthly income under § e page. All figures should reflect your average monthly expense for					
56	Expense Description	Monthly Amount					
	a.	\$					
	b.	\$					
	C.	\$					
	d. Total: Add Lines a, b,	c. and d \$					
		, 1					
	Part VIII. VERII	FICATION					
57	I declare under penalty of perjury that the information provided in the must sign.)  Date: January 11, 2009	Signature: /s/ Gordon G. Van Hyning Gordon G. Van Hyning (Debtor)					
57	Date: <b>January 11, 2009</b>	Signature // Is/ Charlene A. Van Hyning Charlene A. Van Hyning (Joint Debtor, if any)					